

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH PTO-876)**

APPLICANT'S

09/857687

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
2					1	
3					1	
4						
5						
6						
7						
8		3		3		2
9		3		3		2
10		3		3		2
11		3		3		
12		3		3		
13		3		3		
14	1		1		1	
15		1		1		1
16	1		1		1	
17		1		1		1
18	1		1		1	
19		1		1		1
20						2
21						2
22						2
23						2
24						2
25						2
26						2
27						2
28						2
29					1	
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50						
TOTAL IND.	7		7		6	
TOTAL DEP.	18		12		27	
TOTAL CLAIMS	25		22		33	

	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						